



At Churchwood Everyone Can

Speech and Language Therapy Service Policy

The Speech and Language Therapy Service strives to operate a highly effective service which offers both assessment and therapy to pupils with speech, language and communication needs. In addition the SaLT team provides advice, training and support to all academy staff to enable support for speech and language needs across all environments and elements of the curriculum.

Referral Process

Consultation

In order for the Speech and Language Therapist (SaLT) to discuss cases in detail with staff, a signed consent for consultation needs to be obtained from the parent/carer. This needs to be completed in **black ink only or can be word processed**. Consultations need to be uploaded to CPOMS and given to the SENCO to be uploaded into the secure 'Consultations' file in Teams. Please note this is not the same as a full referral for assessment and therapy.

UoBAT PARENT/CARER SPEECH AND LANGUAGE ASSESSMENT AND THERAPY CONSULTATION & INTERVENTION PERMISSION FORM

Child's Name:	
D.O.B:	
Current Class and Teacher:	
I give permission for my child to be discussed by a Speech and Language Therapist and for relevant support, screening assessment and advice to be provided:	
Yes/ No (Circle as appropriate)	
I give permission for photos/videos to be taken of my child during the therapy process as evidence of progress:	
Yes/No (Circle as appropriate)	
I give permission for videos of my child to be taken individually or part of a group to be used for internal training to develop staff skills in supporting children with speech, language and communication needs within the University of Brighton Academies Trust:	
Yes/No (Circle as appropriate)	
Signature:	Print Name:
Relationship to child:	Date:

Should it be felt appropriate for the child to be referred for a full assessment, the referral process needs to be followed. To support the Speech and Language Therapist (SaLT) in prioritising the assessment process and also identifying which factors to assess, the process of referral is as follows. Prior to referral, the SENCO or another member of staff needs to complete the following:

- Some form of screening assessment to support the referral (as appropriate to child’s need/needs) e.g.
 - Speech Sounds Checklist
 - Language Link
 - Social Communication Checklists
 - Teddy Talk Test Screen results

- Information Gathering form including the following information:
 - Basic Details about the pupil – date of birth, age etc.
 - Areas of concern
 - Levels of attainment
 - Specific information about the pupil’s needs and background e.g. diagnoses, cognitive difficulties, medical needs, EAL etc.
 - For nursery children we also ask the days and times of attendance at nursery to be recorded

UoBAT SPEECH AND LANGUAGE THERAPY INFORMATION GATHERING FORM

CHILD’S DETAILS		
First Name:	Last Name:	Gender:
D.O.B:	Age: years months e.g. 3 years 8 months	Parent/carer names:
Language Spoken at home: By child:	School/nursery name:	Date child joined current school/nursery:
By family:		Days/times in attendance (nursery):
Is an interpreter required? Y/N		
Previous SALT involvement: Y/N	Therapist details:	Therapy received:
SAFEGUARDING		
Please indicate below any relevant safeguarding information:		
Is the child a looked after child (LAC)?		
REFERRER’S DETAILS		
Referrer’s name:	Job title:	Have referrals been made to other services? Details:

Reason for Referral/ Areas of Concern:

Please check the box to indicate if a concern is present in each area. If you have ticked that there is a concern in a given area you must give a description of the need/your concerns in the box. Checklists for evidence are provided within the document.

Main Areas of Concern	Details
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	Speech Sounds e.g. pronunciation of sounds, sound discrimination skills, phonological awareness.	
	Expressive language e.g. vocabulary, grammar and sentence structure	
	Receptive language e.g. understanding of instructions, concepts and vocabulary	
	Social Communication e.g., turn taking in conversation and games, eye contact, body posture and proximity, tone of voice and volume for context, awareness of listener interests etc.	
	Play Early Years e.g. parallel play, collaborative play, plays alone, imaginary/pretend/symbolic play skills. Older children e.g. engages in collaborative play, taking into account other's ideas and building on play ideas other than their own. Variety of play ideas. Flexibility in play.	
	Attention and Listening e.g. can the child 'listen and do'? Filter out background noise? Requires support to shift attention? Easily distracted by input e.g. light, sound movement.	
	Selective Mutism e.g. does the child struggle with comfortable and confident talking in certain environments and certain people when communication is fluent in another context?	
	Stammer Query e.g. does the child have single word/first sound repetitions? Have you noticed any sounds they particularly struggle with? Does the child block on words? Does the child present with secondary behaviours e.g. tics or looking away? Does the child avoid talking? Does the child seem aware? Are the parents worried? Ask for stammering specific information gathering form if this is a concern.	

Outline of Teacher concerns and performance in the classroom/playground and impact on achievement:

Has a Language Link assessment been completed?






Yes No In process

Please attach the individual assessment sheet.

SCHOOL/PRE-SCHOOL DETAILS
Does the child have an EHCP? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In process
Does the child have an ANP? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are siblings known to the SEN/SALT Team?

Details:

Hearing	Vision
Are there hearing concerns Y/N	Are there vision concerns Y/N
When was the child's hearing last checked?	When was the child's vision last checked?
Does the child present with regular coughs and colds? Y/N	Does the child wear glasses Y/N

Referrer Signature:	Print Name:			
Date completed:				
Checklists (Please double click on the below evidence checklists to open documents. Complete <u>ONLY</u> those relevant to the child's needs):				
 Social Communication Che	 Phonological Awareness Screenin	 UoBAT Language checklist	 Speech sounds checklist	 Nursery Communication Scre

- Consent form for assessment and therapy completed by the parent/carer
- It is important that then when consent is obtained the person gaining consent explains their rationale behind seeking the referral so the parent/carer has a full understanding of why the referral is taking place.

UoBAT PARENT/CARER SPEECH AND LANGUAGE ASSESSMENT AND THERAPY PERMISSION FORM

Child's Name:	
I give permission for my child to be seen by a Speech and Language Therapist, reports to be distributed to relevant professionals:	
Yes/ No (Circle as appropriate)	
I give permission for photos/videos to be taken of my child during the therapy process as evidence of progress:	
Yes/No (Circle as appropriate)	
I give permission for videos of my child to be taken individually or part of a group to be used for internal training to develop staff skills in supporting children with speech, language and communication needs within the University of Brighton Academies Trust:	
Yes/No (Circle as appropriate)	
Signature:	Print Name:
Relationship to child:	Date:

Without this information completed fully, The SaLT will not be able to assess the child until this has been completed.

When receiving the referral, The SaLT will add the child to the waiting list in each academy. All pupils will be assessed within four months and if required therapy will commence within two months after the initial assessment (unless child or therapist absence prevents this).

When referring, all the information collated on the above forms should be scanned in and uploaded to CPOMS as well as given to the SENCO. The SENCO will then add this to the secure Referral file on Teams within the Speech and Language Therapy Channel and will keep hard copies as appropriate.

Assessments and Therapy

The SaLT will have no more than 10 children in focus for assessment at a time. These will be a mixture of current caseload and new referrals and the order of assessment will be determined according to need and impact on access to Education. This will be decided in conjunction with SENCO/Inclusion Team and Principal's concerns as well as the therapist's opinion of clinical need, based on prior therapy, assessment or referral/ screen information provided.

At times there may be deviations from this e.g. new pupils joining an Academy, however to increase the amount of therapy that the SaLT is able to deliver (and therefore her impact) they will only assess pupils once per year or at such point that the child has achieved their current therapy targets. This is to avoid unnecessary assessment when goals and management plans continue to remain relevant and appropriate. In the event of an application being made for an EHC plan, the SENCO would need to request a review assessment through the SaLT.

Therapy will be delivered by both the SaLT and the SaLTAs (Speech and Language Assistants). The provision for each pupil will be determined on a termly basis by the SaLT dependent on the level of need and the level of previous involvement from the service. This will be reviewed on a termly basis.

Children with poor attendance at school and with large amounts of missed therapy will be written to by the school. This will inform the parent/carer of the missed therapy and the next steps for therapeutic involvement. In some cases it may be appropriate to wait from improved attendance at school/nursery prior to the next block of therapy being offered. This will ensure that staff's time is used effectively and will mean children waiting for therapy can be provided with support as early as possible.

Caseload

The SaLT works across Churchwood, Robsack Wood and Hollington Primary Academies and is supported by a team of SaLTAs in each academy. In each academy, the caseload will be capped at 33 pupils per therapist. The SaLT will maintain a caseload spreadsheet which will include a waiting list. Any pupils who are referred to the caseload over this limit, will be placed on a waiting list. When there is a high level of need for therapy, it will be the case that pupils will have blocks of therapy intermittently throughout the year. This will also give the pupils the opportunity to generalise the skills that they are developing in therapy.

There will be prioritisation criteria which will apply when therapy is offered. These will be as follows:

- Language work will be prioritised over speech work (as this will impact on every area of learning)
- Disordered speech work will be prioritised over delayed speech work (as this will impact on development of Literacy skills for the child)
- Younger (school age) pupils will be prioritised over older pupils (as progress is greater with earlier intervention)
- Pupils on the SaLT's caseload will be prioritised over pupils on the NHS caseload
- Pupils without an EHC plan will also be prioritised as EHCP pupils should be listed on the NHS caseload and therefore receive therapy through this mechanism. In these cases the SaLT will support INAs or TAs to work with the pupil on a regular basis on their targets.

Despite these criteria, resources and support will still be offered to staff to enable other members of staff to work with the pupils regularly.

Children will be discharged from the service when they have achieved their current therapy goals and/or are assessed to no longer require specialist intervention for their speech, language and communication needs. Some children may be considered to have developed functional speech, language and communication skills and require strategies and in-class approaches rather than direct therapy. At the point of discharge, children will often still require recommended strategies and approaches. The SaLT will also recommend in some cases that the child continues to be monitored

closely and regularly screened for SLCN by the SEN team and class teachers. Children can always be re-referred into the service if there is any further SLCN identified.

Generalisation

Provision to meet the pupil's Speech and Language needs should be seen as a team approach with the class teaching team, as well as the parents and carers. The team around the child should all ensure they have read the speech and language therapy report and be following recommendations. Support and advice in regards to implementing these recommendations can be provided if requested.

At the start of therapy, an agreement will be drawn up between the SaLT, the SENCO and the class teacher to enable this generalisation to occur. This will identify what the SaLT's role will be in this process i.e. how much therapy the child will receive and how regularly, and also the role of the Class Teacher, Teaching Assistant or Nursery Practitioner.

The SENCO, in conjunction with the SaLT, will monitor the implementation of these strategies to ensure that the progress for these pupils is consistent and ongoing.

Where pupils have an INA, the INA should attend the therapy session when the SaLT completes any intervention. This will then allow generalisation in the classroom.

Clear lines of communication will be formed with parents and carers from the start of any SaLT intervention as provision will be seen as a team approach with parents and carers as well to promote generalisation. Parents and carers will be offered the opportunity to attend therapy sessions and may be provided with resources to support their child at home, as appropriate. Once an appointment date has been accepted by a parent or carer, it is their responsibility to cancel or rearrange the appointment if they are no longer able to attend. Two instances of non-attendance at these appointments, without prior notification, (known as DNA) will equate to a letter being sent to parents and carers from the SENCO. This letter will notify the parent or carer that the pupil will be removed from the caseload if there is a further instance of non-attendance. Three instances of non-attendance at a SaLT appointment, without prior notification, will result in the pupil being removed from the caseload. This is due to the importance of ensuring a holistic approach to therapy care and to highlight the importance of parental involvement. A pupil can always be re-referred to the service if there is an ongoing concern.

Policy status and review

Written by:	Beth Search –Gillham
Owner:	Ros Collett (Principal)
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